

# TELECOMMUNICATIONS BUILDING FACT SHEET

FACILITY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FACILITY TELEPHONE #: \_\_\_\_\_

24-HR. CONTACT LOCATION: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

EMERGENCY CONTACTS:      NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

FACILITY MANAGER - BUSINESS #: \_\_\_\_\_ HOME #: \_\_\_\_\_

KEY BOX LOCATION: \_\_\_\_\_

FIRE DEPARTMENT ACCESS: \_\_\_\_\_

FIRE DEPARTMENT DATA BOX LOCATION: \_\_\_\_\_

## BUILDING INFORMATION

BLDG. DIMENSIONS: \_\_\_\_\_ # OF STORIES \_\_\_\_\_

BLDG. CONSTRUCTION: \_\_\_\_\_ ROOF CONSTRUCTION \_\_\_\_\_

BASEMENT:    YES \_\_\_\_\_    NO \_\_\_\_\_

HEATING TYPE:    ELECTRIC \_\_\_\_\_    GAS \_\_\_\_\_    OTHER \_\_\_\_\_    IF OTHER SPECIFY \_\_\_\_\_

MAIN GAS SHUT OFF LOCATION: \_\_\_\_\_ METER LOCATION: \_\_\_\_\_

MAIN ELECTRIC SHUT OFF LOCATION: \_\_\_\_\_ METER LOCATION: \_\_\_\_\_

EMERGENCY DIESEL EQUIPMENT:    YES \_\_\_\_\_    NO \_\_\_\_\_

DIESEL SELF-START:            YES \_\_\_\_\_    NO \_\_\_\_\_

## FLAMMABLE LIQUIDS & COMPRESSED GASES

TYPE OF GAS OR LIQUID STORED: \_\_\_\_\_

SIZE OF TANKS: \_\_\_\_\_ LOCATION OF TANKS: \_\_\_\_\_

PORTABLE FIRE EXTINGUISHERS PROVIDED IN BUILDING:            YES \_\_\_\_\_    NO \_\_\_\_\_

TYPES: HALON\_\_\_\_\_ CO<sup>2</sup>\_\_\_\_\_ WATER\_\_\_\_\_ OTHER\_\_\_\_\_

EMERGENCY LIGHTING PROVIDED: YES\_\_\_\_\_ NO\_\_\_\_\_

EXIT LIGHTS PROVIDED: YES\_\_\_\_\_ NO\_\_\_\_\_

SUPPRESSION SYSTEM: PROVIDED? YES\_\_\_\_\_ NO\_\_\_\_\_ COMPLETE\_\_\_\_\_ PARTIAL\_\_\_\_\_

IF PARTIALLY SUPPRESSED, NOTE AREAS NOT COVERED:\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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FIRE PUMP: YES\_\_\_\_\_ NO\_\_\_\_\_ G.P.M.:\_\_\_\_\_ LOCATION:\_\_\_\_\_

STANDPIPE PROVIDED: YES\_\_\_\_\_ NO\_\_\_\_\_

FIRE DEPT. EXTERNAL CONNECTION LOCATION:\_\_\_\_\_

INTERNAL STANDPIPE LOCATION(S):\_\_\_\_\_

### FIRE ALARM SYSTEM INFORMATION

PROVIDED? YES\_\_\_\_\_ NO\_\_\_\_\_ CENTRAL STATION\_\_\_\_\_ DIRECT\_\_\_\_\_ LOCAL\_\_\_\_\_

FIRE ALARM CONTROL PANEL LOCATION:\_\_\_\_\_

ANNUNCIATOR PANEL LOCATION:\_\_\_\_\_

REMOTES:\_\_\_\_\_

### COMMENTS

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

DATE:\_\_\_\_\_ FIRE DEPARTMENT CHIEF:\_\_\_\_\_

TELEPHONE FACILITY MANAGER:\_\_\_\_\_

3/26/01